PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number 110199.405USPC	
FY 2005		Ę.		1
(Fees pursuant to the Consolidated Appropriation	ns Act, 2005 (H.R. 4		· · · · · · · · · · · · · · · · · · ·	4
Application Number 10/568,654		Filed (Ir	Filed (Int'l) 23 August 2004	
For MITOQUINONE DERIVATIVES USED AS MI	TOCHONDRIALLY	TARGETED ANT	TIOXIDANTS	
Art Unit		Examiı	Examiner	
This is a request under the provisions of 37 CF reply in the above identified application.	R 1.136(a) to exter	nd the period for fil	ing a	į
The requested extension and fee are as follows fee below):	s (check time perio	d desired and ente	er the appropriate	
•	<u>Fee</u>	Small Entity Fee	2	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>60</u>	
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37	' CFR 1.27.			
X A check including the amount of the fee is e	enclosed.			
Payment by credit card. Form PTO-2038 is	attached.			
The Director has already been authorized to		<b>S</b>		
application to a Deposit Account.	Ū			
The Director is hereby authorized to charge	any fees which ma	y be required,		
or credit any overpayment, to Deposit Acc	count Number 19-1	090. I have enclos	sed a	
duplicate copy of this sheet.				
WARNING: Information on this form may becons included on this form. Provide credit card info				
I am the ☐ applicant/inventor.				
assignee of record of the entire inter	est. See 37 CFR 3	3.71		
Statement under 37 CFR 3.73(b)	is enclosed (Form	PTO/SB/96).		
🛛 attorney or agent of record. Registra	ation No. <u>43,058</u>			
attorney or agent under 37 CFR 1.34	<b>1</b> .			
Registration number if acting under	37 CFR 1.34	.•		
Shler I Pan-	_	Februar Regression	y 22 <sub>2</sub> 2007 1 22 2007 1 25686	54
☐ <b>β</b> ignature		97 FC:2251 Date		0.00 0
Stephen J. Rosenman, Ph.D.	_	206-622-4	1900	
Typed or printed name		Telephone Nur	nber	
NOTE: Signatures of all the inventors or assignees of re Submit multiple forms if more than one signature is requi		rest or their represer	ntative(s) are required.	
SEND TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alex			906306_1.DOC	_